

LOS ANGELES COUNTY DISTRICT ATTORNEY'S OFFICE BUREAU OF INVESTIGATION • WHITE COLLAR CRIME UNIT

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Guidelines for Completing the White Collar Crime Complaint Form

Before filling out the attached form, please take the time to read these guidelines. They will help you to understand our function, and we will be able to understand and act on your complaint.

What We Can Do:

The Los Angeles County District Attorney's Office White Collar Crime Unit investigates sophisticated, multi-jurisdictional, multi-defendant theft cases where the total dollar loss is over \$300,000.00. Typical cases involve complex investment schemes, embezzlement of funds, and theft by false pretenses. This office is not legally permitted to represent individuals in civil matters, take action in order to obtain money owed, help cancel any debt due on a contract that was signed, resolve or mediate individual complaints, or obtain any other personal relief. These functions are performed by a number of other government agencies established for these purposes.

When we receive a complaint, we review all the information and supporting documentation that was included. If the complaint does not meet the above-listed criteria to open a case, we will do our best to refer you to an agency that can handle your case. Many disputes are not appropriate for government action but are appropriate for private legal action. It is generally a good idea to consult with private counsel to explore civil remedies that might be available. In small matters, local small claims courts should also be considered.

How You Can Help Us:

- A. Write or type a summary of your complaint and attach the summary to the complaint form. Please include the following information:
 - 1. Tell us **what** happened. How did the alleged crime occur?
 - 2. Tell us **who**—person(s) or company(ies)—is (are) responsible for the loss.
 - 3. Tell us **where** (address, city, and state) the incident, conversion(s), or act(s) took place.
 - 4. Tell us **when** the theft occurred and **when** you discovered it. List exact dates.
 - 5. Tell us what your actual financial loss is, if known. Do not include lost interest, unrealized profits, or missed opportunities.
- B. Documentary evidence is especially important; therefore, please only include photocopies of all documents and materials (*contracts*; *agreements*; *certificates*; *notes*; *deeds*;

correspondence; legible copies of involved checks, front and back; escrow; loan documents; etc.) you wish us to review. Please retain the originals for your records.

- C. Type or print clearly in ink.
- D. If you have any questions concerning this form, you may call the Duty Investigator at (213) 974-3612 during regular working hours, Monday through Friday, 8:30 am to 5:00 pm.
- E. Upon completion of all the sections of the complaint form, <u>please mail</u> the form along with copies of your supporting documentation to:

Los Angeles County District Attorney's Office
Bureau of Investigation
White Collar Crime Unit
Attn: Sergeant
211 West Temple Street, 3rd Floor
Los Angeles, California 90012

All Complaints must have the attached complaint form completely filled out and the form must be signed and dated by the <u>complaining party</u> (not by their attorney) before a case can be opened.

We hope this information will be of assistance to you.

Los Angeles County District Attorney's Office Bureau of Investigation

WHITE COLLAR CRIME UNIT COMPLAINT FORM

Your Full Name:	Residence Address:	Phone Number:
Occupation:	Business Address:	Business/Cell Phone:
E-Mail Address:		
I declare I have a complaint	against:	
Full Name of Suspect:	Suspect's Phone:	Suspect's Address:
Identifier, if known:	Business Address:	Business/Cell Phone:
The following attached docume	ntation supports my allegation:	
Contract or Agreement (Des	cription of what you thought you v	vere investing in)
Cancelled Check(s) (Front &	& Back)	
☐ Employee Contract		
☐ Employee Job Duties		
☐ Invoices, Accounts Payable	, Accounts Receivable	
Correspondences between y	ou and the suspect(s) (Letters, E-	mails, Faxes)
Copies of any civil complai	nts filed on behalf of you or other	s
Copies of all documents that	relate to your complaint which are	e not listed above

Date of 1st Transaction/Agreement:	Place where Transaction/alleged crime occurred (Address, City, State):
Amount(s) Stolen:	Date of Last Transaction:
Date alleged crime was discovered:	
Have you or any other victim fil No	ed a civil action (lawsuit) in any court in this matter?
Yes If yes, please provide conumber).	opies of court documents and the date of filing (include case
Disposition of the Court Case:	
II C'I I I I I I I I I I I I I I I I I I	
No No	ith another law enforcement or consumer protection agency?
Yes If yes, please provide the handling the case.	ne name, address, and phone number of agency and the person
Disposition with that agency:	
Have you contacted the suspects of your funds?	(s) or business regarding your complaint and demanded restitution
Yes If yes, provide the name	e of the person you contacted and the date(s) contact(s) made:
No No	ss or personal relationship with the suspect(s)?
Yes If yes, indicate the natur	re of the relationship, the duration, and whom it was with.

List names, addresses, and phone numbers of other individuals who may have further knowledge of this matter. Have you contacted them? When?
Are you willing to appear in court as a witness to this complaint and truthfully testify to the allegations made in this complaint?
No If no, give the reason.
Yes
NOTE: Section 148.5(a) of the California Penal Code states:
"Every person who reports to any peace officer listed in section 830.1 or 830.2, or subdivision
(a) of Section 830.33, the Attorney General, or a deputy attorney general or a district attorney, or deputy district attorney that a felony or misdemeanor has been committed, knowing the report
to be false, is guilty of a misdemeanor."
I declare under penalty of perjury under the laws of the State of California that the foregoing statements and photocopies of attached documents are true and correct.
Date:
Signature of Complainant

Please attach your summary to this complaint form outlining the details of your complaint. Cite specific allegations, dates, and names of involved parties. Also cite corroborating evidence that supports your claim. If additional room is needed to answer questions feel free to attach additional sheets.